PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number.

RLE COPY

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER T		
	TAL OLAIMO		(Column	1)	(Colu	ımn 2)		TYPE		OR	SMALL ENTITY		
- IC	TAL CLAIMS		~ ···					RATE	FEE		RATE	FEE	
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	mir	nus 20=	*			X\$ 9=		OR	X\$18=		
INC	EPENDENT CL	AIMS	mi	nus 3 =	*			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					405		1 1			
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in d	column 2	,	+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL		
J) ((Column 1)	(Column 2) (Column 3)				ı	SMALL ENTITY			OTHER THAN R SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONÀL FEE	
	Total	. 19	Minus	19	7	=		X\$ 9=	_	OR	X\$18=		
	Independent	· 4	Minus	*** 4		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		J	, +135=		OR	+270=		
							ŧ	TOTAL			TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE		OR	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u> =]	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM		╽	+135=		OR	+270=		
								TOTAL ADDIT. FEE			TOTAL	·	
		(Column 1)		(Colu	mn 2)	(Column 3)		NUUII. FEE	· · · · · · · · · · · · · · · · · · ·		ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=]	X40=			X80=		
ட	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛ ┞			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
••	If the "Highest Nu If the "Highest Nu	mber Previously Particusty Previously P	aid For" IN THI aid For" IN TH	S SPACE	is less tha	an 20, enter "20 an 3, enter "3."		TOTAL ADDIT. FEE			TOTAL ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE C			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16					RATE	FEE		RATE	FEE	
FO	3		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEAE	BLE CLAIMS	(L minus 20=					X\$ 9=		OR	X\$18=	-	
IND	EPENDENT CL	AIMS	3 minus 3 =		*			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALLE	NTITY	OTHER SMALL I			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	- 18	Minus	20	/	=		X\$ 9=		OR	X\$18=		
AME	Independent	* 3 NTATION OF MI	Minus	*** <u>3</u>	T CL AIM	= /		X40=		OR	X80=		
<u> </u>	FIRST PRESE	MIATION OF MI	ULTIPLE DEP	ENDEN	CLAIM		1	+135=		OR	+270=	/	
								TOTAL ADDIT. FEE		or	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)												•	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 18	Minus	2	1	=		X\$ 9=		OR	X\$18=		
AME	Independent	• 3	Minus	***	Z.	= -		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=		
	\wedge ,							TOTAL		OR	TOTAL		
		(Column 1)	(Column 2) (Column 3)				ADDIT. FEE		•	ADDIT. FEE	<u> </u>		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	• 19	Minus	2	מי	=]]	X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	***		= /	1	X40=		OR	X80=		
<u> </u>							L	+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										Ĺ			